Transfer Notifications

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Introduction

Purpose

Use this section to do the following:

- Notify public health agency staff in another jurisdiction that a person is moving (or has moved) to their jurisdiction who is any of the following:
 - Verified or suspected case of tuberculosis (TB) disease
 - High-priority contact to a smear-positive Class 3 or Class 5 pulmonary case, contact to a smear-negative Class 3 pulmonary case, or contact to a highly suspect Class 5 pulmonary case. See Chapter 2 – Surveillance Table 1.
 - Documented convertor who has initiated treatment for latent tuberculosis infection (LTBI)
 - Class 2 or Class 4 patient who has initiated treatment for LTBI
 - Close associate to a Class 3 index case with clinical presentation consistent with recently acquired disease in a source-case investigation or close associate to a child with LTBI in a source-case investigation
- Follow up on notifications.
- Make CURE-TB referrals for TB patients and contacts who move between the United States and Mexico.
- Refer mobile TB patients for enrollment in the TBNet tracking and referral service.

Making sure that TB patients complete their evaluation and treatment is a critical element of TB control. Some patients receiving treatment for TB disease in the United States move from one jurisdiction to another before completing treatment. Notifying the receiving local and/or state jurisdiction of a patient's impending arrival will prevent care from being interrupted and improve treatment outcome.

The term *transfer notification* refers to a referral or follow-up report. Before the patient moves, or as soon as it becomes apparent that a patient has moved, the referring jurisdiction provides a referral to the receiving jurisdiction. After the patient has moved, the receiving jurisdiction then provides the referring jurisdiction with a follow-up report.

Policy

The Wyoming TB Program is responsible for coordination of transfer notifications between states and other local jurisdictions within the state. The local public health jurisdiction should notify the state public health department when a patient plans or requests to transfer to another jurisdiction. The receiving and referring jurisdictions should stay in communication until final dispensation of the patient is known.



For roles and responsibilities, refer to the "Roles, Responsibilities, and Contact Information" topic in the Introduction.

When to Initiate a Notification



For TB classifications, see the "Tuberculosis Classification System" Table 1 in

Table 1: TRANSFER NOTIFICATIONS AND FOLLOW-UPS²

Referral Type	When to Initiate	Notes
Verified and suspected cases of tuberculosis (TB) disease	When notified that a Class 3 or 5 patient is moving or has moved from the area for 30 days or more	May also initiate to coordinate directly observed therapy (DOT) while patient is visiting another area.
Contacts	After identifying a: High-priority contact to a smear-positive Class 3 or Class 5 pulmonary case Contact to a smear-negative Class 3 pulmonary case Contact to a highly suspect Class 5 pulmonary case	Send individual referrals for each contact.
Latent TB Infection (LTBI) converters	When notified that a documented convertor who has initiated treatment is moving or has moved from the area for 30 days or more	
LTBI reactors	When notified that a Class 2 or 4 patient who has initiated treatment is moving or has moved from the area for 30 days or more	
Source case investigation for TB disease	After identifying a close associate to a Class 3 index case with clinical presentation consistent with recently acquired disease	Use primarily for associates to children under 5 years of age with TB disease. A younger age cut-off may be advisable because the focus would be on more recent transmission. ³
Source case investigation for LTBI	After identifying a close associate to a child with LTBI	Use primarily for associates to children under 2 years of age with LTBI.4

Follow-Up Type	When to Initiate	Notes	
Final disposition	When final status and/or outcome is known		

Source: NTCA. Interjurisdictional Tuberculosis (TB) Notification—National Tuberculosis Controllers Association Recommendations. Smyrna, GA: March 2002:1–5.

How to Issue a Notification

Inside the United States (within the state or between states), see Table 2: **Referrals in the United States**.

Outside the United States, contact the Wyoming TB Program at 307-777-8939. The Wyoming TB Program will work with the country impacted to report the case.

Transfers Inside the United States

Transfers Within Wyoming: Refer to the middle column in Table 2: **Referrals in the United States.**

Transfers Between States: An interjurisdictional tuberculosis (TB) notification system has been set up by the National Tuberculosis Controllers Association (NTCA) to facilitate and standardize communication between states. This system will enhance continuity and completeness of care and improve outcome evaluation of verified cases.⁵ Refer to the right column in Table 2: **Referrals in the United States.**

Table 2: REFERRALS IN THE UNITED STATES⁶

Action	Transfers Within Wyoming	Transfers Between States
Make a referral	The public health agency from which the patient is transferring should do the following as soon as possible: Call the Wyoming TB Program at 307-777-8939 Copy the updated, complete local public health file on the patient, and send the copy to the jurisdiction receiving the patient Call the patient's private provider and arrange for transfer of the patient's records to the receiving physician (or to the jurisdiction receiving the patient if no receiving physician is designated)	The public health agency from which the patient is transferring should do the following as soon as possible: Call the Wyoming TB Program at 307-777-8939
Provide records to the patient	The public health agency from which the patient is transferring should provide the patient a copy of the treatment records	The public health agency from which the patient is transferring should provide the patient a copy of the referral and treatment records
Follow up on referrals	Not necessary	Contact the Wyoming TB Program at 307-777-8939

Action Transfers Within Wyoming Transfers Between States

- * The NTCA's "Interjurisdictional Tuberculosis Notification" form is available online at this hyperlink: http://tbcontrollers.org/docs/IJ_Form_Page1.pdf .
- [†] NTCA's "Interjurisdictional TB Notification Follow-Up" form is available online at this hyperlink: http://tbcontrollers.org/docs/IJ_Form_Page2_Followup.pdf.

Source: NTCA. Interjurisdictional Tuberculosis (TB) Notification–National Tuberculosis Controllers Association Recommendations. Smyrna, GA: March 2002:1–5.



For more information on completing the NTCA forms, see the NTCA's *Interjurisdictional Tuberculosis (TB) Notification—National Tuberculosis Controllers Association Recommendations* (NTCA Web site; March 2002) at this hyperlink: http://tbcontrollers.org/docs/IJ_Instructions.pdf.

Transfers Outside the United States

Centers for Disease Control and Prevention International Notifications

The Wyoming TB Program is responsible for international transfer notifications. The local health jurisdiction should notify the state health department when a patient moves outside the country.



Local healthcare agency staff: The information below is provided for your information only. State program staff will fill out these forms.

The notification process for international TB cases developed by the CDC is briefly described on the "Process for International Notification of TB Cases" Web page at this hyperlink: http://www.cdc.gov/tb/pubs/international/default.htm .

In Wyoming, phone in these referrals directly to the Wyoming TB Program at 307-777-8939 within one week of receiving information about the patient's move or identifying a contact/associate.

CURE-TB: Transfers to Mexico

The Wyoming TB Program initiates a CURE-TB referral within one week of receiving information about the patient's move or identifying a contact/associate.

Instead of the CDC notification, make referrals through CURE-TB (http://www.curetb.org), a referral program for TB patients and their contacts moving between the United States and Mexico. This program provides direct guidance to patients and facilitates the exchange of information between providers in both countries. Services are available to patients and providers all over the United States and Mexico.⁷

Referrals accepted by the CURE-TB program include the following:

- Patients with suspected or confirmed TB disease who are moving or spending more than one month in Mexico
- Contacts who move between the United States and Mexico
- Contacts living in Mexico who have been exposed to a confirmed case living in the United States
- Source case finding for an index case in the United States when there is reasonable suspicion of TB disease in a person living in Mexico
- Requests for a patient's clinical history while living in Mexico, if sufficient locating information regarding the Mexican provider is supplied

TBNet: International Transfers in Mobile, Underserved Populations

The Wyoming TB Program initiates a TBNet referral within one week of the start of treatment.

TBNet (http://www.migrantclinician.org/network/tbnet) is a multinational TB patient tracking and referral project for mobile, underserved populations. Although the program was originally created for migrant farm workers, it is expanding to include any patient who might be mobile during their treatment, such as the homeless, immigration detainees, or prison parolees.⁸

TBNet offers the following services:

- Portable, wallet-sized treatment records. TBNet supplies TB clinics with records that summarize a patient's TB treatment and can easily be carried by the patient.
- Toll-free line (1-800-825-8205) for healthcare providers and patients. Healthcare
 providers from the United States or Mexico can call to request an up-to-date copy of
 medical records of patients enrolled in TBNet. Patients can call for help with locating
 treatment facilities at their next destination.

References

CDC. International notification of tuberculosis cases [Division of Tuberculosis Elimination Web site]. Available at: http://www.cdc.gov/tb/pubs/International/default.htm. Accessed June 30, 2008.

NTCA. Interjurisdictional Resources [NTCA Web site]. Available at: http://tbcontrollers.org/?p=9. Accessed June 30, 2008.

³ CDC, NTCA. Guidelines for the investigation of contacts of persons with infectious tuberculosis; recommendations from the National Tuberculosis Controllers Association and CDC, and guidelines for using the QuantiFERON®-TB Gold test for detecting *Mycobacterium tuberculosis* infection, United States. *MMWR* 2005;54(No. RR-15):31.

⁴ CDC, NTCA. Guidelines for the investigation of contacts of persons with infectious tuberculosis; recommendations from the National Tuberculosis Controllers Association and CDC, and guidelines for using the QuantiFERON®-TB Gold test for detecting *Mycobacterium tuberculosis* infection, United States. *MMWR* 2005;54(No. RR-15):31.

⁵ NTCA. Interjurisdictional Resources [NTCA Web site]. Available at: http://tbcontrollers.org/?p=9. Accessed June 30, 2008

⁶ NTCA. Interjurisdictional Resources [NTCA Web site]. Available at: http://tbcontrollers.org/?p=9. Accessed June 30, 2008